Fill in this information to identify your case:					
Debtor 1	Louis A Garozzo				
Debtor 2 (Spouse, if filing)	Patricia A Garozzo				
United States E	Bankruptcy Court for the: Eastern District of PA				
Case number (if known)	21-10598				

Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:							
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income** and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B. lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during

				Column Debtor		Column Debtor non-fili	_
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$	0.00	\$	0.00
nony and maintenance payments. Do not include umn B is filled in.	e payme	ents from	a spouse if	\$	0.00	\$	0.00
amounts from any source which are regularly pyou or your dependents, including child supporm an unmarried partner, members of your househod roommates. Do not include payments from a spoul listed on line 3.	<b>t.</b> Includ	e regular depende	contributions nts, parents,	\$	0.00	\$	0.00
income from operating a business, fession, or farm	Debtor	1					
oss receipts (before all deductions)	\$_	0.00					
linary and necessary operating expenses	-\$	0.00					
et monthly income from a business, profession, or fa	ırm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
et income from rental and other real property	Debtor	1					
oss receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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btor 1 btor 2	Louis A Garozzo Patricia A Garozzo			Case	number ( <i>if kn</i>	own) 21	-10598	
				Colun Debto		De	lumn B btor 2 or n-filing spouse	
. Into	erest, dividends, and royalties			\$	0.	00 \$	0.00	
. Un	employment compensation			\$	0.	00 \$_	1,336.00	_
the	not enter the amount if you conte Social Security Act. Instead, list it	here:		er				
	For you For your spouse		0.00					
ber not Uni disa pay	nsion or retirement income. Do nefit under the Social Security Act include any compensation, pensitited States Government in connectability, or death of a member of the paid under chapter 61 of title 10, es not exceed the amount of retire etired under any provision of title 1	not include any amount rece Also, except as stated in the on, pay, annuity, or allowand tion with a disability, combar e uniformed services. If you then include that pay only to d pay to which you would ot	ne next sentence, do ce paid by the at-related injury or received any retired to the extent that it therwise be entitled		0.	<b>00</b> \$_	0.00	
Do und cor crir cor Go dea	not include any benefits received der the Federal law relating to the der the National Emergencies Act onavirus disease 2019 (COVID-19 me, a crime against humanity, or in mensation, pension, pay, annuity vernment in connection with a distant of a member of the uniformed parate page and put the total below	under the Social Security Anational emergency declare (50 U.S.C. 1601 et seq.) wite); payments received as a voternational or domestic term, or allowance paid by the Uability, combat-related injury services. If necessary, list of	act; payments made and by the President the respect to the victim of a war forism; or United States or or disability, or					
·				\$	0.	00 \$_	0.00	
				\$	0.	00 \$	0.00	_
	Total amounts from separate	e pages, if any.	4	- \$	0.	00 \$_	0.00	_
	Iculate your total average montlich column. Then add the total for 0			0.	00+	1,33	36.00 = \[ \\$	1,336.00
rt 2:	Determine How to Measure	Your Deductions from Inc	ome				n	nonthly income
	py your total average monthly in	***************************************					\$	1,336.00
	You are not married. Fill in 0 be	ow.						
	You are married and your spous	se is filing with you. Fill in 0 l	below.					
	You are married and your spous	se is not filing with you.						
	Fill in the amount of the income dependents, such as payment of	of the spouse's tax liability or	r the spouse's supp	ort of sor	neone oth	er than yo	u or your depen	dents.
	Below, specify the basis for exc adjustments on a separate page		imount of income de	evoted to	each pur	pose. If ne	cessary, list add	ditional
	If this adjustment does not apply	, enter 0 below.						
			\$					
			\$					
						7		
	Total		\$		0.00	Copy he	re=>	0.00
l. <b>Y</b> e	our current monthly income. So	ubtract line 13 from line 12.	L			_	\$	1,336.00
5. <b>C</b>	alculate your current monthly ir	come for the year. Follow	these steps:					

## 

Debtor 1 Debtor 2	Louis A Garozzo Patricia A Garozzo	Case number (if known)	21-10598	
	Multiply line 15a by 12 (the number of months in a year).		<b>x</b>	12
1	5b. The result is your current monthly income for the year for this pa	rt of the form	\$	16,032.00

Case 21-10598-amc Doc 14 Filed 04/02/21 Entered 04/02/21 14:44:22 Desc Main Page 4 of 4 Document

Debto Debto		Patricia A Garozzo			Case number (if known)	21-10598	
16.	Calc	culate the median family income that	applies to yo	u. Follow these ste	ps:		
	16a	a. Fill in the state in which you live.	_	PA			
	16b.	o. Fill in the number of people in your ho	ısehold.	4			
		c. Fill in the median family income for you	_			•	103,857.00
		To find a list of applicable median inco instructions for this form. This list may	me amounts,	go online using the	link specified in the separate		,
17.	Hov	w do the lines compare?					
	17a.				of this form, check box 1, <i>Disposa</i> In of Your Disposable Income (O		
	17b.		ill out Calcula	ation of Your Disp	, check box 2, <i>Disposable incom</i> osable Income (Official Form 1		
Part	3:	Calculate Your Commitment Perio	d Under 11 U	.S.C. § 1325(b)(4)			
18.	Сор	py your total average monthly income	from line 11	·		\$	1,336.00
19.	cont	duct the marital adjustment if it applie stend that calculating the commitment pe buse's income, copy the amount from line					
	•	a. If the marital adjustment does not appl		ne 19a.		-\$	0.00
	19b.	o. Subtract line 19a from line 18.				\$	1,336.00
20.	Calc	culate your current monthly income f	or the year. F	Follow these steps:			J
	20a	a. Copy line 19b		1,336.00			
		Multiply by 12 (the number of months i	n a year).			_	<b>x</b> 12
	20b	o. The result is your current monthly inco		16,032.00			
						L	
	20c.	c. Copy the median family income for you	ur state and si	ze of household fro	m line 16c		103,857.00
		, , , , , , , , , , , , , , , , , , , ,					
	21.	How do the lines compare?					
		Line 20b is less than line 20c. Un period is 3 years. Go to Part 4.	orm, check box	3, The commitment			
		Line 20b is more than or equal to commitment period is 5 years. Go		ess otherwise order	ed by the court, on the top of pag	ge 1 of this form	, check box 4, The
Part	4:	Sign Below					
	By s	signing here, under penalty of perjury I o	leclare that the	e information on this	s statement and in any attachme	nts is true and o	correct.
x	/s/	/ Louis A Garozzo		X	/s/ Patricia A Garozzo		
^	Lo	ouis A Garozzo			Patricia A Garozzo		
	•	gnature of Debtor 1			Signature of Debtor 2		
	Date	e April 2, 2021 MM / DD / YYYY			Date April 2, 2021 MM / DD / YYYY		
	If v∩	ou checked 17a, do NOT fill out or file Fo	orm 122C-2				
		ou checked 17b. fill out Form 122C-2 an		s form. On line 39 o	of that form, copy your current m	onthly income f	om line 14 above

Louis A Garozzo